| Complete and mail this form, together with ap le fees, to:  Box ISSUE FEE Assistant Commiss Washington, D.C. 20  MAILING STRUCTIONS: This form should be used for transmitting the ISSUE FEE. Place.   | ploner for Pation.  O231  P  P  |
|--|---|
| through 4 should be complete, where appropriate. All further correspondence including the Issue Fe Receipt, the Parest application of maintenance fees will be mailed to the curren correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a   | Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an        |
| specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" to maintenance fee notifications.  | Certificate of Mailing  |
| CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)   | I hereby certify that this issue Fee Transmittal is being deposited with  |
| PATENT-SEA QM12/0123   | the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.  |
| PERKINS COIE LLP   |   |
| P.O. BOX 1247  | Tracy Gutscher (Description and   |
| SEATTLE WA 98111-1247  | (Depositor's name)  |
| the state of the s | (Signature)   |
|  | April 23, 2001 (Debt)   |
| APPLICATION NO. FILING DATE TOTAL CLAIMS   | EXAMINER AND GROUP ART UNIT DATE MAILED   |
| 09/436,790 11/08/99 024 HONG, W  | 3725 01/23/01   |
| Applicant FLADGARD, 35 USC 154(b) term ext. = 0 Days.  |   |
| WENTERAND-HELD CUTTING TOOL FOR CUTTING FIBER-CEMENT SIDING  |   |
| ATTY'S DOCKET NO. CLASS-SUBCLASS BATCH NO. APPLN. TYPE   | SMALL ENTITY FEE DUE DATE DUE   |
| 2 31957.8004US\ 451-356.000 A99 UTILIT   | Y YES \$620.00 04/23/01   |
| Change of correspondence address (or Change of Correspondence Address form PTC/SB/122) attached.  (1) the names attorneys or a the names of member a regular and the names are considered.   | on the patent front page, list of up to 3 registered patent gents OR, alternatively, (2) a single firm (having as a gistered attorney or agent) go of up to 2 registered patent tents. If no name is listed, no rinted. |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitue for filling an assignment.  (A) NAME OF ASSIGNEE   | 4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):  I tssue Fee  Advance Order - # of Copies   |
|  | 4b. The following fees or deficiency in these fees should be charged to:  |
| (B) RESIDENCE: (CITY & STATE OR COUNTRY)   | DEPOSIT ACCOUNT NUMBER 50-0665  |
| Kingston, WA Please check the appropriate assignee category indicated below (will not be printed on the patent)  | (ENCLOSE AN EXTRA COPY OF THIS FORM)  |
| ☐ Individual   | X Issue Fee Advance Order - # of Copies   |
| The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the appl   |   |
| (Astrodzed Signature) (Date)   |   |
| 4 123 2001   |   |
| NOTE; The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.  | 04/27/2001 BMBUYEN2 00000109 500665 09436790  |
| Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231  Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection  | 01 FC:242 620.00 CH<br>02 FC:561 12.00 CH   |
| of information unless it displays a valid OMB control number.  | •   |